

State Plan under Title XIX of the Social Security Act
State/Territory: North Carolina

TARGETED CASE MANAGEMENT SERVICES

For Children And Adults With Developmental Disabilities/Delay Or Traumatic Brain Injury
Manifested Prior To Age 22 Or Children With Special Health Care Needs

Target Group (42 Code of Federal Regulations 441.18(8)(i) and 441.18(9)):

This target group includes the individuals below who meet the requirements defined in the Children's Development Service Agencies policy, Child Service Coordination policy or Title 10A of the North Carolina Administrative Code Subchapter 27G Section 5900:

1. Children less than three years of age who are at risk for, or have been diagnosed with, developmental delay/disability, social emotional disorder or a severe chronic illness which would pre-dispose a child to severe chronic illness or developmental delay/disability.
2. Children less than five years of age who have a diagnosed developmental delay, social emotional disorder or severe chronic disease.
3. Adults and children five years of age and older, who are diagnosed with a developmental delay/disability manifested prior to the age of 22, or diagnosed with mental retardation, or who have mental or physical impairments similar to developmental disabilities as the result of a traumatic brain injury manifested after age 22.

☒ Target group includes individuals transitioning to a community setting. Case-management services will be made available for up to 60 consecutive days of a covered stay in a medical institution or up to 180 days for infants in a neo-natal intensive care unit. The target group does not include individuals between ages 22 and 64 who are served in Institutions for Mental Disease or individuals who are inmates of public institutions. (State Medicaid Directors Letter (SMDL), July 25, 2000)

Areas of State in which services will be provided (§1915(g)(1) of the Act):

☒ Entire State

☐ Only in the following geographic areas: [Specify areas]

Comparability of services (§§1902(a)(10)(B) and 1915(g)(1))

☐ Services are provided in accordance with §1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount duration and scope (§1915(g)(1)).

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Definition of services (42 CFR 440.169): Targeted case management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

- ❖ Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:

- taking client history;
- identifying the individual's needs and completing related documentation; and
- gathering information from other sources such as family members, medical providers, social workers, and educators (if necessary), to form a complete assessment of the eligible individual.

The TCM recipient is assessed on an ongoing basis to determine if additional services or different services might be needed and at least annually as a part of the review of the individualized services plan, referred to as the care plan.

- ❖ Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that:
 - specifies the goals and actions to address the medical, social, educational, and other services needed by the individual;
 - includes activities such as ensuring the active participation of the eligible individual, and working with the individual (or the individual's authorized health care decision maker) and others to develop those goals; and
 - identifies a course of action to respond to the assessed needs of the eligible individual.
- ❖ Referral and related activities (such as scheduling appointments for the individual) to help the eligible individual obtain needed services including,
 - activities that help link the individual with medical, social, educational providers, or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan; and

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❖ Monitoring and follow-up activities:

- activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:
 - services are being furnished in accordance with the individual's care plan;
 - services in the care plan are adequate; and
 - changes in the needs or status of the individual are reflected in the care plan.Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

Plans are monitored on at least an annual basis or at any time additional services are needed and requested by or for a recipient. The plan will be reviewed and agreed upon by the recipient, recipient parent or legal representative and case manager.

✕ Case management includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

(42 CFR 440.169(e))

Qualifications of providers (42 CFR 441.18(a)(8)(v) and 42 CFR 441.18(b)):

Qualifications for Individual Case Managers: Case Managers under this State Plan must meet one of the following qualifications based on the target population being served:

- A. For children less than three years of age who are at risk for, or have been diagnosed with, developmental delay/disability, social emotional disorder or a severe chronic illness which would pre-dispose a child to severe chronic illness or developmental delay/disability.

Provider agencies are certified by the North Carolina Division of Public Health, Early Intervention Branch as having in-depth knowledge, experience and understanding of the special populations of infants and children who are in this defined target population. Qualifications for case managers are established by the Division of Public Health, Early Intervention Branch. They are as follows:

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1. Case managers for an infant or toddler, referred to or enrolled in the Early Intervention Program, shall meet *one* of the following qualifications regarding degree held:
 - Hold a master's degree from an accredited university in a health, education, early childhood, or human services field.
 - Hold a current North Carolina license in nursing, regardless of whether a two, three, or four-year educational program.
 - Be an infant or toddler's case manager who is working with children and families under the supervision of a Case Management Supervisor as defined below to conduct those case management activities that they have been approved to perform.
2. An infant or toddler's case manager must be approved through the certification process of the Division of Public Health Early Intervention Branch for the NC Infant-Toddler Program.
3. A Case Management Supervisor shall meet *one* of the following qualifications regarding degree held:
 - Hold a master's degree from an accredited university in a health, education, early childhood, or human services field; or
 - Hold a bachelor's degree from an accredited university in a health, education, early childhood, or human services field and have a minimum of two years of experience in providing services to infants or toddlers with or at risk for developmental delays.
4. A Case Management Supervisor must be approved through the certification process of the Division of Public Health Early Intervention Branch for the NC Infant-Toddler Program.
5. Certification Process. The Division of Medical Assistance has adopted the Division of Public Health, Infant Toddler Program standards and procedures for certification of each individual case manager. This certification process assures:
 - a. Their capacity to provide case management services.
 - b. Their experience with delivery and/or coordination of services for children and families.

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- c. Their capacity to assure quality.
 - d. Their experience in sound financial management and record keeping.
- B. For children less than 5 years of age who have a diagnosed developmental delay, social emotional disorder or chronic physical condition.

Provider agencies are certified by the North Carolina Division of Public Health, Women's and Children's Health Section as having in-depth knowledge, experience and understanding of the special populations of infants and children who are in this defined target population.

1. A provider agency with the appropriate knowledge, experience and understanding of this population of children with special care needs must have a signed agreement that specifies the following:
 - a. Description of target population to be served.
 - b. Overall plan for providing service coordination to families.
 - c. Methods and procedures for sharing information among service agencies and providers to promote appropriate referral linkages and follow-up.
 - d. Agree to meet all program requirements.
 - e. Agree to individual orientation of each case manager and have staff that meets the qualification for case management below.
2. Individual case manager shall meet one of the following criteria:
 - a. A master's degree in a human service area such as social work, sociology, special education, child development, counseling, psychology, or nursing.
 - b. A bachelor's degree in a human service area that includes the aforementioned disciplines. The professional should be licensed or certified as applicable. Two years of experience in working with children and their families is required.
 - c. A registered nurse in North Carolina with two years of experience working with children and their families.
 - d. The experience may be waived if during a probationary period the case manager works under the supervision of a Child Service Coordinator who:
 - i. Have initial and ongoing conferences with the case manager to review, evaluate and assess each element of job performance.
 - ii. Supplements on-the-job training with skill building educational opportunities.

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iii. Receives feedback from recipients concerning key elements of job performance.

C. Case managers for adults and children five years of age and older or children in the CAP-MR/DD HCBS waiver, who are diagnosed with a developmental delay/disability manifested prior to the age of 22, or diagnosed with mental retardation, or who have mental or physical impairments similar to developmental disabilities as the result of a traumatic brain injury manifested after age 22 shall meet *one* of the following qualifications regarding degree held:

1. A Licensed clinical social worker; or
2. A Licensed psychologist; or
3. A Master's prepared individual with degree in a human service area with one year of experience in case management with the developmentally disabled; A Master's prepared individual with a degree in a human service field, employed by the agency at the time of enrollment, but who does not have one year of experience with public sector case management must meet this experience criteria within one year; or
4. A Bachelor's prepared individual with degree in a human service area with two years of experience in case management with the developmentally disabled; A college prepared individual with a Baccalaureate degree in a human service area that includes the above disciplines, employed by the agency at the time of enrollment, but does not have two years experience with public sector case management must meet this experience criteria within two years; or
5. Registered nurse currently licensed by the North Carolina Board of Nursing at the time of enrollment with two years experience with public sector case management; Registered nurse currently licensed by the North Carolina Board of Nursing employed at the time of enrollment but does not have two years experience with public sector case management must meet this experience criteria within two years.

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Qualifications for Agency Providers for adults and children five years of age and older or children in the CAP-MR/DD HCBS waiver, who are diagnosed with a developmental delay/disability manifested prior to the age of 22, or diagnosed with mental retardation, or who have mental or physical impairments similar to developmental disabilities as the result of a traumatic brain injury manifested after age 22 shall meet *one* of the following qualifications regarding degree held.

To provide TCM for persons with Developmental disabilities, provider agencies will include both Local Management Entities (LMEs) and private providers through subcontracting arrangements with LMEs. If Local Management Entities serve as providers, they will be approved by the Division of Mental Health, Developmental Disabilities and Substance Abuse. These provider agencies must have the capacity to assure quality and provide services according to North Carolina laws, policies and regulations.

By July 1, 2010, private providers will be endorsed by the Local Management Entities. Upon provider endorsement, each provider must ensure that each case manager has 20 hours of training relating to case management functions within the first 90 days of hire.

Local Management Entities (LMEs) will monitor the providers of Targeted Case Management Services, for the LME targeted population, per Administrative Rule. Each provider will be assigned a level of confidence, and that level will determine the frequency and extent of monitoring by the LMEs, with providers with high confidence based upon a statewide automated tool being monitored less frequently than providers who score low confidence. Services will be monitored by DHHS audit and monitoring staff to assure compliance with all federal and state requirements.

Agencies providing Targeted Case Management Services for children 0 to 5 years of age in the Public Health System must be certified by the Division of Public Health as qualified to provide case management services to ensure services are delivered in accordance with Federal and State standards. The Division of Public Health will implement methods and procedures to certify all providers for case management that demonstrate that they have the capacity to provide case management services and have the experience with delivery and/or coordination of services for persons meeting the criteria for children eligible for services under this amendment.

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EPSDT: The statewide vendor conducts reviews for consumers under the age of 21, when additional services may be requested even if they do not appear in the State Medicaid Plan or when coverage is limited to those over 21 years of age. Service limitations on scope, amount, or frequency described in the coverage policy may not apply if the service is medically necessary. Any denial, reduction, suspension or termination of a service requires notification to the recipient and/or legal guardian about their appeal rights.

Freedom of choice (42 CFR 441.18(a)(1):

The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible individuals will have free choice of any qualified Medicaid provider within the specified geographic area identified in this plan.
2. Eligible individuals will have free choice of any qualified Medicaid providers of other medical care under the plan.

Freedom of Choice Exception (§1915(g)(1) and 42 CFR 441.18(b)):

✕ Target group consists of eligible individuals with developmental disabilities or with chronic mental illness. Providers are limited to qualified Medicaid providers of case management services capable of ensuring that individuals with developmental disabilities or with chronic mental illness receive needed services.

For children less than three years of age who are at risk for, or have been diagnosed with, developmental delay/disability, social emotional disorder or a severe chronic illness which would pre-dispose a child to severe chronic illness or developmental delay/disability OR Children less than five years of age who have a diagnosed developmental delay, social emotional disorder or severe chronic disease, TCM
Provider

Agencies must be certified by the Division of Public Health as meeting both business and service quality criteria.

For all other target populations, Targeted Case Management Provider Agencies must be endorsed by the Local Management Entity by July 1, 2010 as meeting both business and service quality criteria.

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Access to Services (42 CFR 441.18(a)(2), 42 CFR 441.18(a)(3), 42 CFR 441.18(a)(6):

The State assures the following:

- Case management (including targeted case management) services will not be used to restrict an individual's access to other services under the plan.
- Individuals will not be compelled to receive case management services, condition receipt of case management (or targeted case management) services on the receipt of other Medicaid services, or condition receipt of other Medicaid services on receipt of case management (or targeted case management) services; and
- Providers of case management services do not exercise the agency's authority to authorize or deny the provision of other services under the plan.

Payment (42 CFR 441.18(a)(4)):

Payment for case management or targeted case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

Case Records (42 CFR 441.18(a)(7)):

Providers maintain case records that document for all individuals receiving case management as follows: (i) The name of the individual; (ii) The dates of the case management services; (iii) The name of the provider agency (if relevant) and the person providing the case management service; (iv) The nature, content, units of the case management services received and whether goals specified in the care plan have been achieved; (v) Whether the individual has declined services in the care plan; (vi) The need for, and occurrences of, coordination with other case managers; (vii) A timeline for obtaining needed services; (viii) A timeline for reevaluation of the plan.

Limitations:

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities are an integral and inseparable component of another covered Medicaid service (State Medicaid Manual (SMM) 4302.F).

Case management does not include, and Federal Financial Participation (FFP) is not available in expenditures for, services defined in §441.169 when the case management activities constitute the

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direct delivery of underlying medical, educational, social, or other services to which an eligible individual has been referred, including for foster care programs, services such as, but not limited to, the following: research gathering and completion of documentation required by the foster care program; assessing adoption placements; recruiting or interviewing potential foster care parents; serving legal papers; home investigations; providing transportation; administering foster care subsidies; making placement arrangements. (42 CFR 441.18(c)).

FFP only is available for case management services or targeted case management services if there are no other third parties liable to pay for such services, including as reimbursement under a medical, social, educational, or other program except for case management that is included in an individualized education program or individualized family service plan consistent with §1903(c) of the Act. (§§1902(a)(25) and 1905(c)).

The State may impose unit limits as approved by the Physician's Advisory Group (PAG) according to Session Law 2003, Section 284 10.19.(bb).